

UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

	50.000	EIDOT MANED ADDI IOANT	ATT	ORNEY DOCKET NO.	
APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	1 AIII	OTHER DOORER NO.	
09/934773					
09 934773 540503				EXAMINER	
בעיטדנ				EAAMINEN	
				PAPER NUMBER	
			ART UNIT		
			JØ) —	13	
			DATE MAILED		
	INTER	RVIEW SUMMARY			
All participants (applicant, applicant's	representative, PTO persor	nnel):			
		(3) NR LITES	·~		
2) M5 ADRIA-O	0,70	(0) (1)	<u></u>		
2) 113 8120110		(4)			
Date of Interview		<u></u>			
Type: Telephonic Personal (c	copy is given to applica	applicant's representative).		
Exhibit shown or demonstration condi	ucted: ☐ Yes Д No If yo	es, brief description:			
Agreement 🗆 was reached. 🛈 was	4				
Claim(s) discussed:	<u>6</u>				
dentification of prior art discussed:	NOW				
• ,					
				 SexXXD	
Description of the general nature of w	hat was agreed to if an agr	eement was reached, or any other	r comments:	CONTROL BOX	
AMEDNEWTS 7	o chaims 7	o Get Trem In	8 PT 1 FE	COPU, STOP FOR	
AMONANCE	<u> </u>				
(A fuller description, if necessary, and must be attached. Also, where no co attached.)	d a copy of the amendment py of the amendments whic	s, if available, which the examine th would render the claims allowa	r agreed would ren ble is available, a	der the claims allowable summary thereof must be	
1. It is not necessary for applican	t to provide a separate reco	ord of the substance of the intervie	ew.		
Unless the paragraph above has bee IS NOT WAIVED AND MUST INCLU action has are ready been filed, APP SUBSTANCE OF THE INTERVIEW.	DE THE SUBSTANCE OF I	THE INTERVIEW ISSEMPLE SO	ection / 13.04). Il a	response to the last Office	
 Since the Examiner's interview rejections and requirements th is considered to fulfill the responsible interview unless box 1 abo 	at may be present in the las onse requirements of the las	any attachments) reflects a comp st Office action, and since the clai st Office action. Applicant is not re	ms are now allowa elieved from provid	ling a separate record of	
Examiner Note: You must sign this fo	orm unless it is an attachme	nt to another form.			
FORM PTOL-413 (REV.1-96)					
• •			· 1111/		